SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11266OF 22744 (check only one) X 11a	
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) DCCC				
Full Name (Last, First, Middle Initial) NANETTE B. LEAMAN Mailing Address 1462 ARNOLD RD			Date of Receipt 10 18 2015	
City	•			
OAK HARBOR	WA 98277-8220		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		250.00	
Name of Employer PENN COVE VETERIANRY CLINIC Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation OFFICE MANAGER Aggregate Year-to-Date ▼ 6250.00		* EARMARKED CONTRIBUTION: SEE BELOW EARMARKED THROUGH ACTBLUE	
Full Name (Last, First, Middle Initial) ACTBLUE PAC Mailing Address 366 SUMMER ST			Date of Receipt	
City SOMERVILLE	State MA	Zip Code 02144-3132	10 18 2015 Transaction ID : VT4C3PP8E75E Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.			250.00	
Name of Employer	Occupation CONDUIT	TOTAL LISTED IN AGG. FIELD		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1554220.02	[MEMO ITEM] NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.	
Full Name (Last, First, Middle Initial) NANETTE B. LEAMAN			Date of Receipt	
Mailing Address 1462 ARNOLD RD			10 25 2015	
City State OAK HARBOR WA		Zip Code 98277-8220	Transaction ID : VT4C3PPR3K3 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.			100.00	
Name of Employer	Occupation	1		
PENN COVE VETERIANRY CLINIC Receipt For: Primary General Other (specify)	Aggregate	ANAGER Year-to-Date ▼ 6250.00	* EARMARKED CONTRIBUTION: SEE BELOW EARMARKED THROUGH ACTBLUE	
SUBTOTAL of Receipts This Page (optional)		350.00	

TOTAL This Period (last page this line number only).....